COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY PATENT APPLICATION (Includes PCT)

Attorney Docket No.

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Blank for the production of a dental shaped body and method of producing said shaped body

MANUAL DENTAL INSTRUMENT, DENTAL CARE UNIT AND METHOD FOR DISPLAYING DATA USING A MANUAL DENTAL INSTRUMENT

the specification of which (che	eck one): [] i	is attached hereto.		
[] was filed on	as A	Application Serial No.	and was a	amended
on	·			
[] was filed as PCT internation			(if applicable).	and was
I hereby state that I have rev the claims, as amended by ar	iewed and under ly amendment re	stand the contents of the above-identering ferred to above.	tified specification, in	ncluding
I acknowledge the duty to diswith Title 37, Code of Federal	sclose informatio Regulations, §1.	on which is material to the examination 56(a).	on of this application	in accordance
my or our invention thereof, or thereof or more than one yes States of America more than subject of an inventor's certific	r patented or des ar prior to this a one year prior t cate issued befor	invention was ever known or used in acribed in any printed publication in an pplication, that the same was not in this application, that the invention the date of this application in any content legal representatives or assigns more	ly country before my public use or on sal has not been patento buntry foreign to the l	or our invention e in the United ed or made the United States of
inventor's certificate listed b	elow and have	itle 35, United States Code §119 of ar also identified below any foreign a application(s) on which priority is cla	application for pater	(s) for patent or at or inventor's
Prior Foreign Application(s)		Priority Claimed		
10 2004 006 805.4	Germany	11/February/2004	_ [X]	[]
(Number)	(Country)	Day/Month/Year Filed	Yes	No
			[]	[]
(Number)	(Country)	Day/Month/Year Filed	Yes	No
			[]	[]
(Number)	(Country)	Day/Month/Year Filed	Yes	No
I hereby claim the benefit und listed below:	der Title 35, Unit	ed States Code, §119 (e) of any Uni	ted States provisiona	al application(s)
Application No. Day/Mo	nth/Year Filed	Application No. Da	ay/Month/Year Filed	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

COMBINED DECLARATION FOR UTILITY PATENT AP	N AND POWER PLICATION (Inc	OF ATTORNEY cludes PCT)		Attorney Dock	cet No.	
Application Serial No.	Filing Date		Str	atus (patented n	ending, abandoned)	
Application Serial No.	Filing Date		Ott	Creates (benefitied) benefits assured		
Application Serial No.	Filing Date		Sta	Status (patented, pending, abandoned)		
I hereby appoint the registers application and to transact all to calls to telephone no. (202) 906	business in the Pa 3-8600 and faxes to	atent and Trademark o (202) 906-8669.	Office c	onnected therew	ntn. Direct all telephol	
Address all correspondence to 20005-3306.	рукета Gosse	tt PLLC, Suite 300	west,	1300 i Street, i		
I hereby declare that all states information and belief are beliewillful false statements and the Title 18 of the United States Coany patent issued thereon.	eved to be true, as tike so made are	nd further that these a punishable by fine (stateme or impris	ents were made sonment, or both	with the knowledge the i, under Section 1001 idity of the application	
Full Name of First Joint Inventor Matthias Rein	\rightarrow	Invantor d'Signature	A		July 10th 2000 10107106	
Residence: Kriemhildenstr. 6, 64653 Lo	Citizenship German					
Post Office Address: SAME AS ABOVE						
Full Name of Second Joint Invento	ır	Inventor's Signature			Date	
Residence:		Citizenship				
Post Office Address:						
Full Name of Third, Joint Inventor		Inventor's Signature			Date	
Residence:					Citizenship	
Post Office Address:						
Full Name of Fourth, Joint Inventor		Inventor's Signature			Date	
Residence:					Citizenship	
Post Office Address:						